								Application or Docket Number					
	PATENT A	APPLICATIO Effect		(09/0	, 08	028	33					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN		OR	OTHER SMALL	
TOTAL CLAIMS							[RATE		FEE		RATE	FEE
FOR			NUMBER FILED NUMBE			ER EXTRA	BASIC FEE			355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			minus 20= *					X\$ 9	-		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =					X40=			OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	ľ		OR	TOTAL	110	
CLAIMS AS AMENDED - PART II								0111			•	OTHER	
		(Column 1) CLAIMS		(Colu	mn 2) HEST	(Column 3)	r	SMAI	_L_E	ENTITY	OR I	SMALL	
AMENDMENT-A		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	- 18	Minus	**	20	=		X\$ 9	=]		OR	X\$18=	
AME	Independent	. 3	Minus	***	3			X40=	=		OR	X80=	
	HIRST PRESE	NTATION OF M	ULTIPLE DEF	LNDEN	I CLAIM			+135	=		OR	+270=	
								TO	ΓAL			TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		addit. F	EE		1	AUUII. FEE	
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY) FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
AMENDA	Independent	*	Minus	***		=		X40:			OR	X80=	
	FIRST PRESE	NTATION OF M	IULTIPLE DEI	PENDEN	TCLAIM		IJ	+135			1	+270=	
								TO	TAL	i i.	OR	TOTAL	
								ADDIT. F	ΕĒ		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST											1		1 455:
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=			1	X80=	
广	FIRST PRESE	NTATION OF M	NULTIPLE DE	PENDEN	T CLAIM]		-		OR		
	If the entry in colu	mn 1 is less than	the entry in colu	ımn 2. wrii	te "0" in co	lumn 3.		+135			OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OR TOTAL ADDIT. FEE													
	The "Highest Nun						er fou	und in the	e app	propriate bo	x in co	olumn 1.	